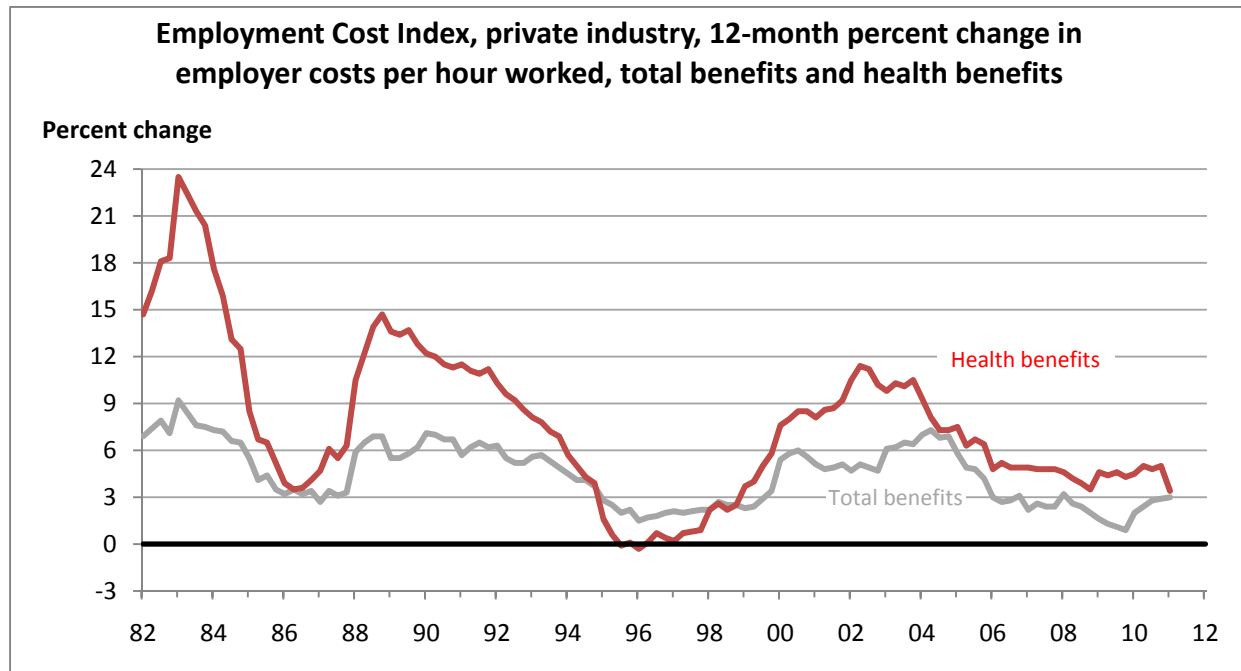


EMPLOYMENT COST INDEX—SUPPLEMENTAL DATA



Health benefits:

Year	March	June	Sept.	Dec.	Year	March	June	Sept.	Dec.
1982	14.7	16.2	18.1	18.3	1997	0.2	0.7	0.8	0.9
1983	23.5	22.4	21.3	20.4	1998	2.2	2.6	2.2	2.5
1984	17.6	15.9	13.1	12.5	1999	3.7	4.0	5.0	5.8
1985	8.5	6.7	6.5	5.2	2000	7.6	8.0	8.5	8.5
1986	3.9	3.5	3.6	4.1	2001	8.1	8.6	8.7	9.2
1987	4.7	6.1	5.5	6.3	2002	10.5	11.4	11.2	10.2
1988	10.5	12.2	13.9	14.7	2003	9.8	10.3	10.1	10.5
1989	13.6	13.4	13.7	12.8	2004	9.3	8.1	7.3	7.3
1990	12.2	12.0	11.5	11.3	2005	7.5	6.3	6.7	6.4
1991	11.5	11.1	10.9	11.2	2006	4.8	5.2	4.9	4.9
1992	10.3	9.6	9.2	8.6	2007	4.9	4.8	4.8	4.8
1993	8.1	7.8	7.2	6.9	2008	4.6	4.2	3.9	3.5
1994	5.7	5.0	4.3	3.9	2009	4.6	4.4	4.6	4.3
1995	1.6	0.6	-0.1	0.1	2010	4.5	5.0	4.8	5.0
1996	-0.3	0.1	0.7	0.4	2011	3.4			

See notes on page 2.

Source: U.S. Bureau of Labor Statistics
 National Compensation Survey
www.bls.gov/ect/sp/echealth.pdf

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NOTE: Data in this supplemental listing include corrections for the June 2009 through September 2010 reference periods. For further information, see: bls.gov/bls/eci_corrections_111910.htm. Data in all historical listings, ECI standard error tables, and the seasonal factors and revised seasonally adjusted indexes tables have been reissued with the corrected data. Also, data in the selective access system at bls.gov/ect/data.htm have been updated with the corrected data.

The Bureau of Labor Statistics publishes a quarterly index, the Employment Cost Index (ECI) that includes measures of change in the cost of employee benefits. Data are collected for individual benefits within several benefit categories: paid leave, supplemental pay, insurance benefits, retirement and savings, legally required benefits, and other benefits. The measure of change in the cost of health insurance presented here is the only benefit for which BLS makes separate data available.

The 12-month percent change in health insurance costs from the ECI should be used with caution. First, employer nonresponse for the health insurance component is substantial, which may affect the quality of the estimate. Second, there are fewer observations supporting health insurance estimates as compared with total benefit estimates. Finally, in some cases, respondents are able to report only a single cost for a combination of benefits (for example, life insurance and health insurance); in these instances, BLS allocates the cost among the benefits. Users should also be aware that the ECI may understate health insurer increases for a fixed set of plans because employers may reduce their contributions or employees may switch to lower cost health plans where there is an employee contribution. For these reasons, please exercise care in using and interpreting these estimates. For further information see: “Health Insurance Series Now Available from the Employment Cost Index” at: bls.gov/opub/cwc/cm20030825ar01p1.htm.